Commonwealth of Virginia Virginia Employment Commission

Workforce Investment Act



NOMINATION FORM Local Youth Council



1-Name (First, MI, Last)		-Local Workforce Investment Area (LWIA) Board Name 3-Date		3-Date	
4-Street Address					
			13-Nominee Charact Gender: Male	teristics Female	
5-City	6-County		Race:		
	•		White ☐ Hispanic ☐	Black Amer. Indian	
7-State	8-ZIP		Native Alaskan	Asian	
9-Home Phone (include area code)	code) 10-Work Phone (include area code)		Pacific Islander Other		
11-FAX	12- E-Mail		14-Recommended for (see section number		ıber)
15-Local Board Member/Youth Expertise or Interest Represe			15-Board Member/Expertise/Experience 16-Youth Service Agency		
			17-Housing Authority/	Tenant Org.	
Nominee's Title			18-Parent (of eligible y 19-Former Youth Partic	/outh)	
Organization/Business			20-Job Corps, as appropriate to area		
Type of Business			21-Optional		
16-Youth Service Agency Representative (including juvenile justice/law enforcement)		17-Local Housi Repres	17-Local Housing Authority or Tenant Organization Representative		
Nominee's Title		_ Nominee's Title	Nominee's Title		
Youth Organization		_ Youth Organiza	Youth Organization		
Name of Eligible Youth Name of Eligible Youth		19-Former Youth Participant or Organization with Youth Services Experience Representative Title Organization Nature of Business			
20-Job Corps Representative		21-Optional Re	presentative		
Title		Nomino o'o Title	_		
Organization			Nominee's Title		
Office Location Serving the LWIA		Youth Organiza	ation		_
•	he above named person Board in Local Workforce	•	the Local Youth Council	for the Local	
Signature			Date		
Printed/Typed	Name & Title of Nominator			_	
Nominator Or	ganization			_	
Trommutor Or					
			EAV	<u> </u>	
Phone			FAX	_	